

## PART B - FEE(S) TRANSMITTAL

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Mail Stop ISSUE FEE  
 Commissioner for Patents  
 P.O. Box 1450  
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CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

7590

01/15/2004

KAREN J. MESSICK, ESQ.  
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 1001 BRICKELL BAY DRIVE  
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 MIAMI, FL 33131

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

<u>JARED G. SILBERTORN</u>	(Depositor's name)
<u>[Signature]</u>	(Signature)
<u>1/20/04</u>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
08/962,027	10/31/1997	EUGENIO A. CEFALI	32892.23	8371

TITLE OF INVENTION: INTERMEDIATE RELEASE NICOTINIC ACID COMPOSITIONS FOR TREATING HYPERLIPIDEMIA

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$0	\$1330	04/15/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
JOYNES, ROBERT M	1615	424-465000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 KAREN J. MESSICK  
 2 \_\_\_\_\_  
 3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

KOS PHARMACEUTICALS, INC.MIAMI, FLPlease check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☐ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☐ Publication Fee
- ☐ Advance Order - # of Copies \_\_\_\_\_

4b. Payment of Fee(s):

- ☐ A check in the amount of the fee(s) is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☒ The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-2543 (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

(Date)

1/20/04

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This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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TRANSMIT THIS FORM WITH FEE(S)



PATENTS

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Eugenio A. Cefali

Serial No.:

08/962,027

Filing Date:

31 October 2003

Title:

INTERMEDIATE RELEASE NICOTINIC ACID COMPOSITIONS  
FOR TREATING HYPERLIPIDEMIA HAVING UNIQUE CMAX,  
TMAX AND AUC BIOPHARMACEUTICAL CHARACTERISTICS

Examiner:

Robert M. Joynes

Group Art Unit:

1615

Attorney Docket Number:

50454-56103USCIP1

**VIA FACSIMILE AND MAIL**

1.703.746.4000 (2 pages being transmitted.)

**MAIL STOP ISSUE FEE**

Commissioner For Patents

P.O. Box 1450

Alexandria, VA 22313-1450

**ISSUE FEE TRANSMITTAL**

Dear Sir:

In connection with the above-referenced United States Patent Application and with regards to the Notice of Allowance issued 15 January 2004, please charge the requisite Issue Fee of \$1330.00 to our Deposit Account No. 50-2543. A duplicate copy of this letter is enclosed herewith. No additional costs or fees are believed to be due in connection with this application, however, please charge any additional costs or credit any overpayment to this deposit account.

Respectfully submitted,

Kos Pharmaceuticals, Inc.

Karen J. Messick, Esq.

Attorney for Applicants

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Date: 1/20/04

**CERTIFICATE OF MAILING (37 C.F.R. § 1.8(a))**

*I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to Mail Stop Issue Fee, Commissioner for Patents, Alexandria, VA 22313-1450 on the date indicated below.*

Date: 1/20/04

By:

Jared G. Silberhorn